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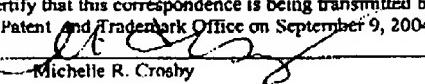
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Date: September 9, 2004

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Signed: 
Michelle R. Crosby

Sender: Cindy S. Kaplan/mrc
Re: Issue Fee Payment for U.S. Patent Application No. 09/895,945
Docket No: SYMXP008
Pages: 9 (including cover)

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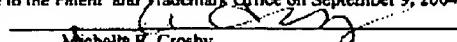
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PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Appn. No.	:	09/895,945	Confirmation No.:	3828
Applicant	:	Trevor G. FRANK et al.		
Filed	:	June 29, 2001		
TC/A.U.	:	1743		
Examiner	:	Brian J. SINES		
Docket No.	:	SYMXP008		
Customer No.	:	26541		
Title	:	IN-SITU INJECTION AND MATERIALS SCREENING DEVICE		

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Signed: 
Michelle R. Crosby

PETITION TO CORRECT ERROR IN SMALL ENTITY STATUS (37 CFR 1.28(c))

Mail Stop Petitions
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

PETITION

1. Applicants hereby petition to correct an error in small entity status for payment of the Issue Fee.

PATENT ISSUE FEE DUE DATE

2. The Issue Fee for this case was paid on September 1, 2004 (copy attached).
3. The final due date for payment of the Issue Fee for this case is September 28, 2004.

ITEMIZATION OF THE DEFICIENCY PAYMENT

4. The Issue Fee was erroneously paid as a small entity.

Attorney Docket No. SYMXP008

5. The small entity Issue Fee paid on September 1, 2004 is as follows:
Issue Fee for small entity: \$665
(Total payment with Issue Fee transmittal is \$968.00 (Issue Fee : \$665, Publication Fee: \$300, Advanced Order Copy: \$3))
6. The large entity Issue Fee is as follows:
Issue Fee for large entity: \$1330
7. Total Deficiency amount owed for Issue Fee:
\$665

PETITION AND DEFICIENCY FEES

8. The deficiency and petition fee are paid as follows:

Please Charge Deposit Account No. 50-1652 (Order No. SYMXP008) the sum of \$795 (deficiency in Issue Fee: \$665, petition fee: \$130). A duplicate of this petition is attached hereto.

If any additional fees are required, please charge such fees or credit any overpayment to Deposit Account No. 50-0685 (Order No. SYMXP008).

Respectfully submitted,


Cindy Kaplan
Reg. No. 40,043

RITTER, LANG & KAPLAN LLP
12930 Saratoga Ave., Suite D1
Saratoga, CA 95070
(408) 446-8690
(408) 446-8691

Attorney Docket No. SYMXP008

PAGE 3/9 * RCVD AT 9/9/2004 7:52:34 PM [Eastern Daylight Time] * SVR:USPTO-EFXRF-1/1 * DNIS:8729306 * CSID:408 446 8691 * DURATION (mm:ss):02:42

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PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Appln. No.	:	09/895,945	Confirmation No.:	3828
Applicant	:	Trevor G. FRANK et al.		
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Respectfully submitted,



Cindy Kaplan
Reg. No. 40,043

RITTER, LANG & KAPLAN LLP
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Saratoga, CA 95070
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(408) 446-8691

Attorney Docket No. SYMXP008

PAGE 5/9 * RCVD AT 9/9/2004 7:52:34 PM [Eastern Daylight Time] * SVR:USPTO-EFXRF-1/1 * DNIS:8729306 * CSID:408 446 8691 * DURATION (mm:ss):02:42

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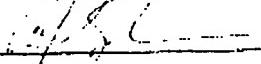
(to be used for all correspondence after initial filing)

TRANSMITTAL FORM		Application Number	09/895,945
		Filing Date	June 29, 2001
		First Named Inventor	FRANK, Trevor G. et al.
		Group Art Unit	1743
		Examiner Name	SINES, Brian J.
Total Number of Pages in This Submission	5	Attorney Docket Number	SYMXP008

ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form PTOL 85 (In duplicate) <input checked="" type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Return Postcard <input type="checkbox"/> Other Enclosure(s) (please identify below):
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RITTER, LANG, & KAPLAN LLP SEP 13 2004 DOCKETED		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm and Individual name	RITTER, LANG & KAPLAN LLP CINDY S. KAPLAN, Reg. No. 40,043
Signature	
Date	September 1, 2004

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I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown:

September 1, 2004

Typed or printed name	Michelle R. Crosby
Signature	
Date	September 1, 2004

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RITTER, LANG & KAPLAN LLP
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Michelle Crosby	(Depositor's name)
<i>M. Crosby</i>	9-1-04
(Signature)	
<i>M. Crosby</i>	
(Date)	

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/895,945	06/29/2001	Trevor G. Frank	1012-076(99-134)	3828

TITLE OF INVENTION: IN-SITU INJECTION AND MATERIALS SCREENING DEVICE

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$665	\$300	\$965	09/28/2004
EXAMINER		ART UNIT	CLASS-SUBCLASS		
SINES, BRIAN J		1743	422-068100		

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2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

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"Fee Address" indication (or "Fee Address" indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

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(A) NAME OF ASSIGNEE

Symyx Technologies, Inc. Santa Clara, California

Please check the appropriate assignee category or categories (will not be printed on the patent): individual corporation or other private group entity government

4a. The following fee(s) are enclosed:

4b. Payment of Fee(s):

Issue Fee

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Publication Fee

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(Authorized Signature) *Cindy S. Kaplan* (Date) 9-1-04

Cindy S. Kaplan, Reg. No. 40,043

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Michelle Crosby	(Depositor's name)
9-1-04	(Signature)
N. J.	(Date)

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1. Ritter, Lang & Kaplan LLP

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(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Symyx Technologies, Inc. Santa Clara, California

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(Authorized Signature) (Date)

Cindy S. Kaplan, Reg. No. 40,043

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FILING ACKNOWLEDGMENT

Mailing Date:	September 1, 2004	Application	09/895,945
Atty Docket:	SYMXP008	Filing Date	June 29, 2001
Applicant	FRANK, Trevor G. et al.	Atty/Sec	CSK/mrc
Title:	IN-SITU INJECTION AND MATERIALS SCREENING		

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